

Department of Land Management  
Licensing Review Board  
116 HAMPTON ROAD  
SOUTHAMPTON, NY 11968

# TOWN OF SOUTHAMPTON



KYLE COLLINS  
TOWN PLANNING AND  
DEVELOPMENT ADMINISTRATOR

Phone: (631) 702-1826  
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ANTHONY D'ITALIA  
CHAIRMAN

JAY SCHNEIDERMAN  
TOWN SUPERVISOR

## Plumber Contractor Registration Certificate Application

### RENEWAL Application

FEE \$150.00

LATE FEE \$175.00

Payable to: *Town of Southampton*

**\*PLEASE NOTE: APPLICATIONS THAT DO NOT MEET THE FOLLOWING REQUIREMENTS WILL BE RETURNED TO THE APPLICANT AS INCOMPLETE.**

- ✗ APPLICATION** must be completed in its entirety and notarized.
- ✗ COPY OF CURRENT SUFFOLK COUNTY LICENSE**  
(Suffolk County Executive's Office of Consumers Affairs license photo identification card)
- ✗ ATTACH A COPY OR COPIES OF VEHICLE REGISTRATIONS**
- ✗ COMPLETE AND ATTACH - [Open Government Disclosure Form](#)**

### FOR DEPARTMENT USE ONLY

Receipt No.	Application	Certificate No

- Business Name: \_\_\_\_\_  
Registration #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Mailing Address (if different than above): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_ Email address: \_\_\_\_\_  
  
Contractor Name (Individual applying for renewal): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_ Email address: \_\_\_\_\_

**\*NOTE: You will no longer receive renewal notifications if you do not provide the Town with an Email Address**

All applications are to be reviewed at the regularly scheduled meetings of the Licensing Review Board held on the second Wednesday of each month. Applications are to be received by last day in month prior to said meeting. Any applications received after that time will be held until the following scheduled meeting. Registration numbers are valid for 24 months from date that it went in front of the Board. Applicant is responsible for renewing said registration number every 24 months by completing and submitting a Plumber Contractor Registration Certificate Application to the Licensing Review Board for review.

## TOWN OF SOUTHAMPTON

## DEPARTMENT OF LAND MANAGEMENT

116 Hampton Road  
Southampton, NY 11968  
631-283-6000

[www.southamptontownny.gov](http://www.southamptontownny.gov)



JAY SCHNEIDERMAN  
TOWN SUPERVISOR

KYLE P. COLLINS, AICP  
TOWN PLANNING AND  
DEVELOPMENT ADMINISTRATOR

## Open Government Disclosure Form

(Zoning Board of Appeals, Planning Board, Conservation Board, all other Land Management Review)

STATE OF NEW YORK)

ss:

COUNTY OF SUFFOLK)

\_\_\_\_\_, being duly sworn, deposes and says:

Print Name

I am the owner and/or applicant for a project that is the subject of a pending application before the Southampton (Check one)  
☐ **Zoning Board of Appeals**, ☐ **Planning Board**, ☐ **Conservation Board** ☐ **all other Land Management Review**. I make this affidavit under penalty and swear to the truth herein. I am aware that this affidavit is required by General Municipal Law §809 and Southampton Town Code [Chapter 23](#) and that I shall be guilty of a misdemeanor should I knowingly or intentionally fail to make all disclosures herein. I am also aware that I may be subject to the penalties in Southampton Town Code [§23-14](#) should I knowingly or intentionally fail to make all disclosures herein.

1. The application name is: \_\_\_\_\_
2. I reside at \_\_\_\_\_
3. The officers of the applicant corporation/owner corporation are as follows:  
 Pres. \_\_\_\_\_ Sec. \_\_\_\_\_  
 Vice Pres. \_\_\_\_\_ Treas. \_\_\_\_\_
4. Do any of the following individuals have an interest in the owner or applicant (as defined on page iii, note "A")?

	<u>Yes</u>	<u>No</u>
A. Any official of New York State	<input type="checkbox"/>	<input type="checkbox"/>
B. Any elected or appointed official or employee of Southampton Town or Suffolk County	<input type="checkbox"/>	<input type="checkbox"/>

If the answer to Question 4 is YES, General Municipal Law §809 and Town Code [Chapter 23](#) require that you disclose the name and the nature and event of the interest of said individual(s) in the owner or applicant.

<u>Name</u>	<u>Residence</u>	<u>Nature of Interest</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. During the 24 months before the filing of this application, have any of the following individuals made campaign contributions exceeding \$500 in total, in cash or in kind, to the campaign for public office of any Town officer or employee, to any individual campaign committee, or to any political party committee designated to accept donations on such Town official's or employee's behalf as a candidate for public office?

	<u>Yes</u>	<u>No</u>
1. Owner	<input type="checkbox"/>	<input type="checkbox"/>
2. Applicant	<input type="checkbox"/>	<input type="checkbox"/>
3. Agent for owner or applicant	<input type="checkbox"/>	<input type="checkbox"/>
4. Attorney	<input type="checkbox"/>	<input type="checkbox"/>
5. Other	<input type="checkbox"/>	<input type="checkbox"/>

If the answer to Question 5 is yes, Town Code Chapter 23 requires that the information be provided below:

<u>Name/Address</u>	<u>Amount/Date</u>	<u>Name of Campaign Committee</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. During the preceding 24 months before the filing of this application, have any of the following individuals employed any Town officer or employee or a relative thereof involving compensation in an amount of \$500 or more? Said compensation may be directly made, or indirectly made through a corporation or business interest held by any Town officer or employee or their relative.

	<u>Yes</u>	<u>No</u>
1. Owner	<input type="checkbox"/>	<input type="checkbox"/>
2. Applicant	<input type="checkbox"/>	<input type="checkbox"/>
3. Agent for owner or applicant	<input type="checkbox"/>	<input type="checkbox"/>
4. Attorney	<input type="checkbox"/>	<input type="checkbox"/>
5. Other	<input type="checkbox"/>	<input type="checkbox"/>

If the answer to Question 6 is yes, Town Code [Chapter 23](#) requires that the information be provided below:

<u>Name</u>	<u>Position</u> (Owner, Agent, Attorney, Other)	<u>Corporation</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**READ AND CHECK BOX**

☐ **False statements made herein are punishable as a class "A" Misdemeanor pursuant to Section 210.45 of the New York State Penal Law.**

A. For the purposes of this disclosure, an official of the State of New York or an elected or appointed official or employee of the Town of Southampton shall be deemed to have an interest in the owner and/or applicant when that official or employee, their spouse, brothers, sisters, parents, children, grandchildren or the spouse of any of them is:

- the owner or applicant; or
- an officer, director, partner, or employee of the applicant or owner; or
- Legally or beneficially owns or controls stock of a corporate applicant or owner, or is a member of a partnership or association applicant or owner; or
- Is a party to an agreement with the applicant or owner, express or implied, whereby said official or employee may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable approval of such application. Ownership of less than five percent of the stock of a corporation whose stock is listed on the New York Stock or American Stock Exchange shall not constitute an interest for the purposes of this disclosure.

**Submitted by (please print):** \_\_\_\_\_